NOTICE OF FILING / CLAIM FEE(S) DUE
(CALCULATION SHEET)

APPLICATION NUMBER: _09441966_

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101						=	760.00
Total Claims >20	203/103	27	-20 = 7	X			=	126.00
Independent Claims >3	202/102	1	-3 = ___	X			=	
Mult. Dep Claim Present	204/104						=	260.00
Surcharge	205/105						=	130.00
English Translation	139							

TOTAL FEE CALCULATION

1,146.00

Fees due upon filing the application:

Total Filing Fees Due = $ _1,276.00_

Less Filing Fees Submitted - $ _/_

BALANCE DUE = $ _1,276.00_

B. Alexander
Office of Initial Patent Examination

Figure 7

PATENT APPLICATION FEE DETERMINATION RECORD
Effective November 10, 1998

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)	SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE		RATE	FEE
BASIC FEE				380.00	OR		760.00
TOTAL CLAIMS	27	minus 20=	* 7	X$ 9=		OR	X$18=	126.00
INDEPENDENT CLAIMS	1	minus 3 =	*	X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT			+130=	,	OR	+260=	260.00
			TOTAL		OR	TOTAL	1,146.00

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

		(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
AMENDMENT A	Total	*	Minus	**	=	X$ 9=		OR	X$18=	
	Independent	*	Minus	***	=	X39=		OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+130=		OR	+260=	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

		(Column 1)		(Column 2)	(Column 3)					
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
AMENDMENT B	Total	*	Minus	**	=	X$ 9=		OR	X$18=	
	Independent	*	Minus	***	=	X39=		OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+130=		OR	+260=	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

		(Column 1)		(Column 2)	(Column 3)					
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
AMENDMENT C	Total	*	Minus	**	=	X$ 9=		OR	X$18=	
	Independent	*	Minus	***	=	X39=		OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+130=		OR	+260=	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than th entry in column 2, writ "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
Th "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriat box in column 1.